PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									Application or Docket Number  9/155448					
CLAIMS AS FILED - PART I								SMALL ENTITY				OTHER THAN		
	TAL OLABAG	<del></del>	(Column 1)		(Column 2)		1	TYPE [			OR	SMALL	ENTITY	
TOTAL CLAIMS			· .					RATE		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			5 minus 20=		<u> </u>			X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			∂ minus 3 =					X40=			OR	X80=	:	
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=			OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL		OR	TOTAL	710,-		
Q	support	LAIMS AS A (Column 1)	MENDED - PART II (Column 2) (Column 3)				SMALL ENTITY			OR	OTHER THAN SMALL ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	IEST IBER OUSLY	PRESENT EXTRA		RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 14	Minus	2	0.	=		X\$ 9=	=	_	OR	X\$18=		
	Independent	. 25	Minus	2	)	= /,		X40=	=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	TIPLE DEPENDENT		/ []		+135	=		OR	+270=		
l									AL		OR	TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column							ADDIT. F	,		•			
AMENDMENT B					IGHEST UMBER PRESEN		1			ADDI-			ADDI-	
		AFTER AMENDMENT		PREVI	OUSLY	EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
Ş	Total	•	Minus	••		=		X\$ 9:	=		OR	X\$18=		
WE WE	Independent	•	Minus	***		=		X40=			OR	X80=	·	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 405				.070		
								+135			OR	+270= TOTAL	ŧ.	
											OR	ADDIT. FEE		
ļ		(Column 1)			mn 2) HEST	(Column 3)								
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	ABER OUSLY FOR	PRESENT EXTRA	RA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*	Minus	••		=		X\$ 9=		/ lela	OR	X\$18=		
MEN	Independent	•	Minus	•••		=	<b> </b>	X40=				X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		<del> </del>		
				+135=			OFi	⊹270=						
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE											OR	TOTAL ADDIT. FEE		
"	If the "Highest Nu The "Highest Nun	mber Previously P nber Previously Pa	aid For IN THI id For (Total o	S SPACE r Independ	is less tha dent) is tha	an 3, enter "3." e highest numbe				propriate bo	x in co	iumn 1.		